PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSU Commissioner for Patents JAN 05 2006 P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885 or Fax INSTRUCTIONS: This form the property of the completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 5514 7590 11/22/2005 FITZPATRICK CELLA HARPER & SCINTO Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 30 ROCKEFELLER PLAZA NEW YORK, NY 10112 (Depositor's name (Signature) (Date CONFIRMATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. FILING DATE APPLICATION NO. 6715 00684.003574 Kazuaki Ono 10/763,166 01/26/2004 TITLE OF INVENTION: IMAGE HEATING APPARATUS AND IMAGE FORMING APPARATUS DATE DUE **PUBLICATION FEE** TOTAL FEE(S) DUE **SMALL ENTITY ISSUE FEE** APPLN. TYPE 02/22/2006 \$1700 \$1400 \$300 NO nonprovisional ART UNIT **CLASS-SUBCLASS EXAMINER** BEATTY, ROBERT B 399-329000 2852 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 FITZPATRICK, CELLA, (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, HARPER & SCINTO (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

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